

**KENTUCKY LABOR CABINET
EMPLOYMENT STANDARDS
APPRENTICESHIP AND MEDIATION**

IMPORTANT NOTICE OF WAGE RATE SURVEY

THIS IS AN OPPORTUNITY TO PARTICIPATE IN SETTING WAGES USED ON PUBLIC WORKS CONSTRUCTION PROJECTS IN KENTUCKY.

UPON SCHEDULING A HEARING FOR A LOCALITY, A SURVEY IS CONDUCTED IN THE APPLICABLE COUNTY OR COUNTIES. WAGES ARE SET BASED UPON THE EVIDENCE SUBMITTED TO THE KYLC BY CONTRACTORS AND SUBCONTRACTORS. THE ES-46 FORM IS USED BY THE KYLC TO SURVEY WAGES PAID BY ALL CONTRACTORS PERFORMING CONSTRUCTION WORK IN THESE COUNTIES.

THE ES-46 FORM, IF RECEIVED BY MAIL SHOULD BE RETURNED TO THE ADDRESS LISTED AT THE BOTTOM OF EACH PAGE OF THE FORM WITHIN THE DEADLINE AS STIPULATED BY THE ENCLOSED LEGAL NOTICE.

THE ES-46 PREVAILING WAGE SURVEY FORM IS ALSO AVAILABLE FROM THE KYLC WEBSITE LOCATED @ [HTTP://WWW.LABOR.KY.GOV/OWS/EMPLOYMENTSTANDARDS/PREVAILINGWAGE/PREVAILINGWAGEFORMS.HTM](http://www.labor.ky.gov/ows/employmentstandards/prevailingwage/prevailingwageforms.htm)

IF YOU HAVE PRINTED THIS FORM FROM THE WEBSITE, YOU SHOULD COMPLETE THE FORM BY THE DEADLINE AS STIPULATED ON THE SCHEDULED HEARING NOTICES PERTINENT FOR EACH LOCALITY. THE SCHEDULE OF HEARINGS MAY BE FOUND

@ [HTTP://WWW.LABOR.KY.GOV/OWS/EMPLOYMENTSTANDARDS/PREVAILINGWAGE/NEWSHEARINGDATES/](http://www.labor.ky.gov/ows/employmentstandards/prevailingwage/newshearingdates/)

AN E-MAIL ADDRESS IS AVAILABLE FOR ANY QUESTIONS PERTAINING TO THE COMPLETION OF THE FORM: LABOR.PWRATE@KY.GOV

YOU WILL FIND A LIST OF FUTURE PREVAILING WAGE HEARINGS ON THE KYLC WEBSITE

@ [HTTP://WWW.LABOR.KY.GOV/OWS/EMPLOYMENTSTANDARDS/PREVAILINGWAGE/NEWSHEARINGDATES/](http://www.labor.ky.gov/ows/employmentstandards/prevailingwage/newshearingdates/)

PLEASE REVIEW THE INSTRUCTIONS PROVIDED FOR COMPLETION OF THIS FORM.

Instructions for completing the ES-46

KYLC ES-46 Instruct

Upon submitting evidence, the contractor will include all projects both public works construction and private construction. Acceptable evidence will include all public works (prevailing wage jobs) and private commercial projects with total project cost in excess of \$250,000.00 that were under construction or completed from the last hearing date indicated on the Legal Notice through the date of the current hearing. Please copy and provide this form to all subcontractors also performing work. Evidence must be postmarked within thirty days of the applicable Prevailing Wage Hearing.

- Complete all categories of the form.
- Complete contractor's information and include a contact name in the box titled "Company/Contractor Representative."

Company/Contractor Name	Address	Phone	Company/Contractor Representative
John Doe Construction	111 John Doe Avenue, Frankfort, KY 40601	502 888-8888	John Doe
Check one: <input checked="" type="checkbox"/> Prime-General or <input type="checkbox"/> Subcontractor: General			

- Provide the project name, description, location, type (Building, Heavy or Highway) and value (total construction cost of entire project).

Full Name of Project	Description of Project	Location of Project (Street, City, & County)	Type of Project Bldg/Hvy/Hwy	Estimated Project Value/Total Project Value
Sample County High	New Middle School	111 Sample St, Frankfort, KY	Bldg	8,000,000.00

Instructions for ES-46

- Indicate each classification such as plumber, electrician, operator, etc and if applicable indicate the type of work performed.
- List the actual date of the pay period when highest number of employees are working (date must be for work performed after last hearing but prior to current hearing). Do not list as "various".
- List total number of employees working in each classification during a single peak pay period. List the base hourly rate, along with listing each fringe as an hourly dollar figure (Do not list percentages). Fringe may include benefits such as health, dental or life insurance, retirement, pension or profit sharing. If information is under category "OTHER", please provide an explanation of this benefit.

Classification	Peak Week Ending Date	Peak # Employed	\$ Base Hourly Rate	\$ Insurance Health/Life/Dental	\$ Pension Retirement	\$Apprenticeship Training	\$ Other Explain
<i>Operator, Group A</i>	<i>1/3/05</i>	<i>44</i>	<i>18.75</i>	<i>3.20</i>	<i>.50</i>	<i>.25</i>	
<i>Electrician, Electrical</i>	<i>1/17/05</i>	<i>12</i>	<i>15.45</i>	<i>2.25</i>	<i>.46</i>	<i>.05</i>	<i>1.00 Cash</i>

- A representative should sign the bottom of page one and check the appropriate box indicating Contractor/Employer or Labor Union Representative.

☐ Contractor/Employer

☐ Labor Union Representative _____

Check appropriate box above

Signature of Representative submitting evidence

ES-46 Page Two Instructions for Completion of Form

- Beginning page two. Complete the questions relevant to fringe.
- Union information should be completed if applicable.
- The Representative submitting evidence should sign name and print name, title and date evidence is submitted, at bottom of page two.

ES-46 Page Three Instructions for Completion of Affidavit

- A representative of the contractor, employer or union should complete and sign. Signature must be notarized.